

2015 Seifert Summer Day Camp Permission Slip/Medical Release Form

PARTICIPANT'S NAME _____ DOB _____ AGE _____ M _____ F _____

PARENT'S NAMES _____

CELL PHONE _____ WORK _____ HOME _____

ADDRESS _____ CITY _____ ZIP _____

EMAIL ADDRESS _____

EMERGENCY CONTACT:

NAME _____

PHONE _____ RELATIONSHIP _____ WORK _____ HOME _____

INSURANCE

CARRIER _____ I.D.# _____

Children must be signed in/out daily by an adult listed below. Please list persons authorized to sign your child in and out of camp. **Individual(s) must be 18 years of age and possess a valid drivers license.**

Individual(s) will be required to show drivers license.

1. _____ Relationship _____ Phone _____

2. _____ Relationship _____ Phone _____

3. _____ Relationship _____ Phone _____

Indemnification & Waiver Language

I fully understand that my participation in this event/program exposes me to the risk of personal injury or property damage. I hereby acknowledge that I am voluntarily participating in this event/program and agree to assume any such risk. I hereby release, discharge and agree not to sue the City of Stockton, its officers, employees, agents, and contractors for any injury or damage to or loss of personal property arising out of, or in connection with, my participation in the event/program from whatever cause, including the active or passive negligence of the promoter/organizer or City or any other participant in the event/program. In consideration for being permitted to participate in the event/program, I hereby agree, for myself, my heirs, administrators, executors and assigns, that I shall indemnify and hold harmless the City from any and all claims, demands, actions or suits arising out of or in connection with my participation. This form will act as a medical release in the case of an emergency.

I understand that by participating in this event/program, that I am giving consent for images of myself to be used for promotional purposes or instruction by the City of Stockton.

I have carefully read this release, hold harmless and agree not to sue and fully understand it contents. I am aware that this form is a full release of all liabilities and signed by my own free will.

Parents will need to have transportation available to pick up their child at camp for violation of any camp regulations. Child(ren) must be picked up in a timely manner.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

Is the child allergic to any medication or foods? If yes, please list _____

Campers must be able to monitor and administer their own medication at camp. Is your child taking any medication?

☐ Yes ☐ No If yes, please list medication _____

Reason for medication _____ Time/dosage: _____

Drop off or mail registration form and check or money order payment (payable to "CITY OF STOCKTON") to:
Arnold Rue Community Center 5758 Lorraine Ave, Stockton CA 95210

FOR OFFICE USE ONLY:: Date Received _____ Fee Enclosed \$ _____ Doc #77367/2015

City of Stockton Community Services Department



2015

Seifert Community Center

128 W. Benjamin Holt Drive
937-8307

Weekly Camps

June 8 - August 7
For Children Ages 5-12
7:30 A.M. - 5:30 P.M.

REGISTER NOW!

Space is limited!

 **CITY OF STOCKTON**
Community Services Department www.stocktongov.com
Creating community through people, parks and programs

**Parks
Make
Life
Better!**

Summer Break Camp

Community Services Department is offering children Ages 5-12 a place to learn, play and have fun during Summer 2015 school break. The children may experience our rock climbing wall, water days, story telling, arts and crafts, sports time, movies and special activities.

Camp Fee

\$80 per child, per week
\$60 per additional sibling, per week



Camp Hours

Monday - Friday 7:30 a.m. to 5:30 p.m.

Late Child Pick Up Fee

Additional \$15 fee per 15 minutes per child is picked up after 5:30 p.m. **No Exceptions!**

Meals

- ◆ Breakfast and lunch will be provided through the Seamless Summer Feeding Program.
- ◆ Please keep in mind that meals/snacks brought from home will **NOT** be heated /warmed.
- ◆ An **afternoon snack must be brought from home.**
- ◆ Participants will be allowed to eat only at designated meal times.

Sample Schedule:*

7:30 - 8:30 a.m.	Sign-in, Passive Recreation
8:30 - 9:00 a.m.	Breakfast
9:00 - 9:45 a.m.	Arts & Crafts
9:45 - 10:30 a.m.	Active Recreation
10:30 - 11:15 a.m.	STEM (Science, Technology, Engineering, Math)
11:15 a.m.- 12 p.m.	Free Play
12:00 - 12:30 p.m.	Lunch
12:30 - 1:15 p.m.	Passive Recreation
1:15 - 2:00 p.m.	Arts & Crafts
2:00 - 2:45 p.m.	Active Recreation
2:45 - 3:30 p.m.	STEM
3:30 - 4:00 p.m.	Afternoon snack (<u>brought from home</u>)
4:00 - 5:00 p.m.	Passive Recreation
5:00 - 5:30 p.m.	Sign-out

*Daily schedule of activities is subject to change

Camp Site

Seifert Community Center
128 W. Benjamin Holt Drive
937-8307

Camp Weeks

(Please check all weeks your child will be attending)

- | | | |
|--------------------------|-------------------------|---------------|
| <input type="checkbox"/> | June 8 - 12 | Week 1 |
| <input type="checkbox"/> | June 15 - 19 | Week 2 |
| <input type="checkbox"/> | June 22 - 26 | Week 3 |
| <input type="checkbox"/> | June 29 - July 3 | Week 4 |
| <input type="checkbox"/> | July 6 - 10 | Week 5 |
| <input type="checkbox"/> | July 13 - 17 | Week 6 |
| <input type="checkbox"/> | July 20 - 24 | Week 7 |
| <input type="checkbox"/> | July 27 - 31 | Week 8 |
| <input type="checkbox"/> | August 3 - 7 | Week 9 |

- ◆ Camp is based on number of participants registered and is subject to cancellation.
- ◆ Payment and registration forms must be received prior to child's attendance at camp.
- ◆ Registration is on a first come, first served basis.

Registration fees will not be refunded or pro-rated.



Registration accepted at:

Arnold Rue Community Center
5758 Lorraine Avenue 937-7350

Seifert Community Center
128 W. Benjamin Holt Drive 937-8307

Van Buskirk Community Center
734 Houston Avenue 937-7358

Stribley Community Center
1760 E. Sonora Street 937-7351

Oak Park Senior Center
730 Fulton Street 937-7777

Cesar Chavez Library
605 N. El Dorado Street 937-8206

For more information call:

Arnold Rue Community Center 937-7350
Community Services Office 937-8206

visit us at:

www.stocktongov.com/daycamps

Like us on Facebook at:

[Facebook.com/COSRecreation](https://www.facebook.com/COSRecreation)



Note: Please label all belongings clearly with child's name. The City of Stockton will not be responsible for lost or stolen items.